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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF MARYLAND	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Cheryl First name A. Middle name Steed Last name and Suffix (Sr., Jr., II, III)	Trevor First name A. Middle name Steed Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Cheryl Adell Steed	Trever Andre Steed
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9095	xxx-xx-6774

Debtor 1 Cheryl A. Steed Trevor A. Steed

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	15751 Millbrook Lane	If Debtor 2 lives at a different address:
		Laurel, MD 20707 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Prince Georges	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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	otor 2 Trevor A. Steed					Case number (if known)	
Par	t 2: Tell the Court About	Your Bank	ruptcy Ca	ase			
7.	The chapter of the Bankruptcy Code you are				each, see <i>Notice Required by</i> ge 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Ba	ankruptcy
	choosing to file under	■ Chapt	ter 7				
		☐ Chapt	ter 11				
		☐ Chapt	ter 12				
		☐ Chapt	ter 13				
8.	How you will pay the fee	abo ord	out how yo	ou may pay. Typica attorney is submitt	lly, if you are paying the fee yo	k with the clerk's office in your local court for ourself, you may pay with cash, cashier's checalf, your attorney may pay with a credit card o	ck, or money
					ments. If you choose this option of the control of	on, sign and attach the Application for Individu	uals to Pay
		☐ I re but app	equest that is not required plies to yo	at my fee be waive juired to, waive you ur family size and y	rd (You may request this option r fee, and may do so only if yo ou are unable to pay the fee in	n only if you are filing for Chapter 7. By law, a ur income is less than 150% of the official poin installments). If you choose this option, you	verty line that
		trie	Аррисац	on to have the Cha	pter 7 Filling Fee Walved (Offic	ial Form 103B) and file it with your petition.	
9.	Have you filed for bankruptcy within the	■ No.					
	last 8 years?	☐ Yes.					
			District			Case number	
			District		When		
			District		When	Case number	
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ No.	Go to	line 12.			
	residence:	☐ Yes.	Has yo	our landlord obtaine	ed an eviction judgment agains	t you?	
				No. Go to line 12.			
				Yes. Fill out <i>Initial</i> this bankruptcy pe		Judgment Against You (Form 101A) and file it	t as part of

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	tor 1 Cheryl A. Steed tor 2 Trevor A. Steed			Case number (if known)				
Part	3: Report About Any Bu	usinesses	You Own as a Sole Proprie	etor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.					
	business.	☐ Yes.	Name and location of bu	siness				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.		Number, Street, City, Sta	ate & ZIP Code ox to describe your business:				
	it to this potition.			iness (as defined in 11 U.S.C. § 101(27A))				
			_	al Estate (as defined in 11 U.S.C. § 101(51B))				
			_ •	defined in 11 U.S.C. § 101(53A))				
				er (as defined in 11 U.S.C. § 101(6))				
			☐ None of the abov	re				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statemed operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the process in 11 U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am not filing under Chapter 11.					
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy				
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Part	4: Report if You Own or	r Have Any	/ Hazardous Property or Ar	ny Property That Needs Immediate Attention				
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and	■ No.	What is the hazard?					
	identifiable hazard to public health or safety? Or do you own any							
	property that needs immediate attention?		If immediate attention is needed, why is it needed?					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?					
				Number, Street, City, State & Zip Code				

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Debtor 1 Cheryl A. Steed
Trevor A. Steed Case number (if known)

Part 5: Exp

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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	otor 1 otor 2	Cheryl A. Ste Trevor A. Ste						Case nu	umber (if kno	own)	
Part	t 6:	Answer These (Questions	s for Repo	ortina Purpos	es					
	Wha	t kind of debts o	do 16						e defined in	n 11 U.S.C. § 101(8) as "incurred	d by an
	you	have?			dividual primai No. Go to line	rily for a personal, t	ramily, or houser	nold purpose."			
				_	Yes. Go to lin						
			16				ss debts? Busin	ess debts are de	lebts that v	ou incurred to obtain	
				mo	oney for a bus	iness or investmer					
				_	No. Go to line						
			4.0		Yes. Go to lir				-1	1-	
			16	oc. St —	ate the type of	debts you owe that	at are not consur	ner debts or bus	siness deb	ots	
17.		you filing under oter 7?		lNo. la	ım not filing ur	nder Chapter 7. Go	to line 18.				
	after	ou estimate that any exempt erty is excluded	_			Chapter 7. Do you ds will be available				s excluded and administrative ex	kpenses
	admi	inistrative exper paid that funds v	nses	-	No						
	be av	vailable for ibution to unsections?			Yes						
18.		many Creditors		1-49			1 ,000-5,000			□ 25,001-50,000	
	you o	estimate that yo ?	ᆜ	l 50-99			☐ 5001-10,000 ☐ 10,001-25,0			☐ 50,001-100,000 ☐ More than100,000	
				l 100-199 l 200-999			— 10,001-25,0	00		in More than 100,000	
19.		much do you		l \$0 - \$50,0	000		□ \$1,000,001 ·	- \$10 million		□ \$500,000,001 - \$1 billion	
		nate your assets orth?		_	- \$100,000		□ \$10,000,001 □ \$50,000,001			\$1,000,000,001 - \$10 billion	
					- \$500,000 - \$1 million		☐ \$100,000,001			☐ \$10,000,000,001 - \$50 billio ☐ More than \$50 billion	n
20.		much do you		l \$0 - \$50,0	000		□ \$1,000,001 ·	- \$10 million		□ \$500,000,001 - \$1 billion	
	estin to be	nate your liabilit ?		_	- \$100,000		□ \$10,000,001			\$1,000,000,001 - \$10 billion	
					- \$500,000 - \$1 million		□ \$50,000,001 □ \$100,000,00			☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	on
Part	t 7:	Sign Below									
For	you		l h	nave exam	ined this petiti	on, and I declare u	nder penalty of p	erjury that the i	information	n provided is true and correct.	
										er Chapter 7, 11,12, or 13 of title to proceed under Chapter 7.	11,
						ne and I did not pay I and read the notic				attorney to help me fill out this	
			l re	equest reli	ef in accordar	ce with the chapte	r of title 11, Unite	ed States Code,	, specified	in this petition.	
			ba	understand ankruptcy o nd 3571.	l making a fals case can resul	e statement, conce t in fines up to \$25	ealing property, on the contract of the contra	or obtaining mor onment for up to	ney or prop 20 years,	perty by fraud in connection with or both. 18 U.S.C. §§ 152, 134	a 1, 1519,
			/s	/ Cheryl				/s/ Trevor A			
				heryl A. S gnature of				Trevor A. St Signature of D			
			Fx	kecuted on	October	3. 2018		Executed on	October	r 3. 2018	
					MM / DD /				MM / DD		

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	heryl A. Steed revor A. Steed		Cas	se number (if known)	
represented	orney, if you are by one t represented by	I, the attorney for the debtor(s) named in this petition under Chapter 7, 11, 12, or 13 of title 11, United Stat for which the person is eligible. I also certify that I h and, in a case in which § 707(b)(4)(D) applies, certif	tes Code, and have e ave delivered to the o	explained the relief a debtor(s) the notice i	vailable under each chapter required by 11 U.S.C. § 342(b)
•	you do not need	schedules filed with the petition is incorrect.	y tilat i flave no know	vieuge aiter air iriqui	y that the information in the
		/s/ Michael A. Ostroff	Date	October 3, 201	18
		Signature of Attorney for Debtor		MM / DD / YYYY	
		Michael A. Ostroff Printed name			
		Montero Law Group, LLC Firm name			
		1738 Elton Road Silver Spring, MD 20903 Number, Street, City, State & ZIP Code			

Email address

Contact phone **301-588-8100**

17803 MD Bar number & State

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- #111	in this infor	mation to identify your	casa:				
		mation to identify your	case.				
Deb	otor 1	Cheryl A. Steed First Name	Middle Name	Last Name			
	otor 2	Trevor A. Steed	Middle Nove	Land Manage			
	use if, filing)	First Name	Middle Name	Last Name			
Unit	ed States Ba	ankruptcy Court for the:	DISTRICT OF MARYLA	AND			
	e number						
(if kn	own)					-	k if this is an Ided filing
	-						g
∩fi	ficial Ec	orm 106Sum					
			and Liahilities ar	nd Certain Statistical Informat	ion		12/15
				e are filing together, both are equally respon			
infor	mation. Fill	out all of your schedul	es first; then complete th	ne information on this form. If you are filing a k the box at the top of this page.			
		•	new Summary and checi	k the box at the top of this page.			
Part	1: Sumn	narize Your Assets					
						Your a	
						value	of what you own
1.	Schedule A 1a. Copy lin	A/B: Property (Official F ne 55, Total real estate, f	orm 106A/B) rom Schedule A/B			\$	212,373.00
						\$	15,939.39
						Ψ	15,959.59
	1c. Copy lir	ne 63, Total of all propert	y on Schedule A/B			\$	228,312.39
Part	2: Sumn	narize Your Liabilities					
						Your I	iabilities
						Amour	nt you owe
2.			laims Secured by Property			¢.	314,822.52
	2a. Copy th	e total you listed in Colu	mn A, <i>Amount of claim,</i> at	the bottom of the last page of Part 1 of Schedu	le D	\$	314,022.32
3.			Unsecured Claims (Officia 1 (priority unsecured claim	ıl Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>		\$	0.00
	.,		"	•		· —	
	3b. Copy to	he total claims from Part	2 (nonpriority unsecured c	laims) from line 6j of <i>Schedule E/F</i>		\$	118,834.18
				Vous total list	.:::::		400 050 70
				Your total lial	ollities \$		433,656.70
Part	3: Sumn	narize Your Income and	I Evnancas				
			-				
4.		· Your Income (Official Fo combined monthly incom		ə I		\$	3,099.85
5.	Schedule I	: Your Expenses (Officia	I Form 106 I)				
0.						\$	5,216.00
Part	4: Answ	er These Questions for	Administrative and Stati	istical Records			
6.	Are you fil	ing for bankruptey und	er Chapters 7, 11, or 13?				
0.	-	•	• • •	heck this box and submit this form to the court	with your	other sc	hedules.
	■ Yes						
7.		of debt do you have?					
	■ Vour	dahta ara primarily can	sumer debts Consumer	debts are those "incurred by an individual prima	rily for a s	orconol	family or
				g for statistical purposes. 28 U.S.C. § 159.	ппутогар	GISUII	, iaiiiiy, Ui
	☐ Your	debts are not primarily	consumer debts. You have	ve nothing to report on this part of the form. Ch	eck this bo	ox and s	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

the court with your other schedules.

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Debtor 1 Cheryl A. Steed
Debtor 2 Trevor A. Steed Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

1,385.31

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	79,547.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	79,547.00

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		C	ase 10-2310	JO L		160 10/03/10 1 6	age 10 of	00		
Filli	in this inforr	nation to identify	your case and th	nis filing	g:					
Deb	tor 1	Cheryl A. St	eed							
		First Name		e Name		Last Name				
	tor 2 use, if filing)	Trevor A. St		e Name		Last Name				
Linit	ad States Ba	nkruptcy Court for	the: DISTRICT	ОЕ МА	RYI AND					
Office	ed States Da	Tikitapicy Court for	tile. Diotition	OI WIA	III LAND					
Cas	e number _					-				Check if this is an
										amended filing
Off	icial Fo	rm 106A/E	3							
Sc	hedul	e A/B: P	roperty							12/15
				an asset	t only once. If a	n asset fits in more than or	ne category, lis	t the asset in	the ca	ategory where you
						e are filing together, both are top of any additional page				
	er every ques		attaon a separate si	11001 10 1	inis ioini. On th	top of any additional page	o, write your in	unic una casi	, mann	bei (ii kilowii).
Part	1: Describe	Each Residence, B	uilding, Land, or Ot	her Real	I Estate You Ow	n or Have an Interest In				
4 Da			itable interact in a		danaa buildina	land, or similar property?				
1. DO	you own or i	lave ally legal of et	quitable interest in a	iny resid	uence, building,	iand, or similar property?				
	No. Go to Par	t 2.								
	Yes. Where is	s the property?								
						_				
1.1	15751 Mill	brook Lane		What		? Check all that apply				
		if available, or other de	scription		Single-family h					r exemptions. Put ns on Schedule D:
	,	•			Condominium	or cooperative	Creditors Who Have Claims Secu			
						or cooperative				
					Manufactured	or mobile home	Current val	us of the	C	rent value of the
	Laurel	MD	20707-0000		Land		entire prop			tion you own?
	City	State	ZIP Code			pperty	\$19	1,873.00		\$191,873.00
					-					wnership interest
						in the property? Check one		e simple, ten: e), if known.	ancy k	by the entireties, or
				W 0		in the property: Check one		by Entirety	y	
	Prince Ge	orges			_					
	County				Debtor 1 and [Debtor 2 only	— Chack	if this is com	muni	ty property
					At least one of	the debtors and another		tructions)	munil	y property
					•	ou wish to add about this it	em, such as lo	cal		
				prop	erty identification	on number:				

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the Current value of the portion you own? Cure of your ownership interest
portion you own? 0.00 \$5,000.00
ple, tenancy by the entireties, or nown.
s is community property s)
cured claims or exemptions. Put y secured claims on Schedule D: eve Claims Secured by Property.
the Current value of the portion you own? 0.00 \$15,500.00 ure of your ownership interest ple, tenancy by the entireties, or
nown. Intirety s is community property s)
t C upr

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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Debto Debto		Cheryl A. St Trevor A. St			Case number (if known)		
3. Ca	rs, vans	s, trucks, trac	tors, sport utility ve	hicles, motorcycles			
	No						
	⁄es						
3.1	Make:	Honda		Who has an interest in the property? Check one		ured claims or exemp secured claims on <i>Sc</i>	
	Model:	Accord		■ Debtor 1 only		ve Claims Secured by	
	Year:	2012		Debtor 2 only	Current value of t	he Current value	ue of the
		imate mileage:		Debtor 1 and Debtor 2 only	entire property?	portion you	own?
	Other	nformation:		At least one of the debtors and another			
				☐ Check if this is community property (see instructions)	\$6,669	.00	\$6,669.00
3.2	Make:	Buick		Who has an interest in the property? Check one		ured claims or exemp	
0.2	Model:	0		■ Debtor 1 only		secured claims on Sove Claims Secured by	
	Year:	1999		Debtor 2 only	Current value of t	-	
	Approx	imate mileage:	82000	Debtor 1 and Debtor 2 only	entire property?	portion you	
	Other i	nformation:		☐ At least one of the debtors and another			
				☐ Check if this is community property (see instructions)	\$1,682	.00 5	\$1,682.00
				n for all of your entries from Part 2, including that number here		\$8,	,351.00
Part 3	Desc	ribe Your Perso	onal and Household Ite	ems			
				terest in any of the following items?		Current value portion you of Do not deduct claims or exe	own? ct secured
Ex	amples No	d goods and factorial describe	f urnishings nces, furniture, linens	, china, kitchenware			
	100. D						
			Sofa, chairs, be cookware/dishe appliances, etc	ds, kitchen set, dining room set, s/glasses, blankets/linens, small/kitcher	ı		\$2,000.00
Ex	No	: Televisions a	I phones, cameras, m		nters, scanners; music co		
			Televisions, cel	lphone, etc.			\$1,000.00

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	Cheryl A. St Debtor 2 Trevor A. St		Case numbe	r (if known)
8.		d figurines; paintings, prints, or ions, memorabilia, collectibles	other artwork; books, pictures, or other art objects; s	tamp, coin, or baseball card collections;
	■ No □ Yes. Describe			
9.	Equipment for sports a Examples: Sports, photo musical instr	ographic, exercise, and other he	obby equipment; bicycles, pool tables, golf clubs, ski	is; canoes and kayaks; carpentry tools;
	■ No □ Yes. Describe			
10.). Firearms <i>Examples:</i> Pistols, rifle	es, shotguns, ammunition, and r	related equipment	
	■ No □ Yes. Describe			
11.	. Clothes Examples: Everyday c	lothes, furs, leather coats, design	gner wear, shoes, accessories	
	■ No □ Yes. Describe			
12.	2. Jewelry Examples: Everyday je □ No	ewelry, costume jewelry, engag	ement rings, wedding rings, heirloom jewelry, watche	es, gems, gold, silver
	Yes. Describe			
		Watches, rings, bracele	ts, necklaces, pendants, etc.	\$250.00
	B. Non-farm animals Examples: Dogs, cats, No Yes. Describe Any other personal ar No Yes. Give specific in	nd household items you did n	oot already list, including any health aids you did	not list
15			rt 3, including any entries for pages you have att	\$3,250.00
Pa	art 4: Describe Your Finar	ncial Assets		
		legal or equitable interest in a	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No	have in your wallet, in your hor	ne, in a safe deposit box, and on hand when you file	your petition
17.			unts; certificates of deposit; shares in credit unions, twith the same institution, list each.	prokerage houses, and other similar
	■ Yes		Institution name:	
		17.1. Checking	Wells Fargo. Account no. *** 6068	\$808.01

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		heryl A. Steed revor A. Steed		Case number (if known)	
		17	7.2. Checking	PNC. Account no. ***9817.	\$3,509.49
		17	7.3. Checking	State Farm Federal Credit Union. Member no. ***6425	\$20.89
		17	7.4. Checking	PNC. Account no. ***9796	\$0.00
18	. Bonds, m Examples ■ No	utual funds, or pu :: Bond funds, inve	ublicly traded stocks stment accounts with b	rokerage firms, money market accounts	
	☐ Yes		Institution or issue	r name:	
19	. Non-publi joint vent		and interests in incorp	porated and unincorporated businesses, including an interest in an l	LLC, partnership, and
	☐ Yes. Gi	ve specific informa	tion about them Name of entity:		
20	Negotiabl	e <i>instrument</i> s inclu	ide personal checks, ca	potiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them.	
		e specific informat	ion about them Issuer name:		
21		nt or pension accor: Interests in IRA,		403(b), thrift savings accounts, or other pension or profit-sharing plans	
	☐ Yes. List	t each account sep T	parately. ype of account:	Institution name:	
22	Your shar Examples		oosits you have made s	so that you may continue service or use from a company c, public utilities (electric, gas, water), telecommunications companies, or c	others
	■ No □ Yes			Institution name or individual:	
23	Annuities	(A contract for a p	eriodic payment of mor	ney to you, either for life or for a number of years)	
	☐ Yes	Issuer	name and description.		
24			A, in an account in a (b), and 529(b)(1).	qualified ABLE program, or under a qualified state tuition program.	
	☐ Yes	Institut	ion name and description	on. Separately file the records of any interests.11 U.S.C. § 521(c):	
25	. Trusts, eq	uitable or future	interests in property (other than anything listed in line 1), and rights or powers exercisabl	e for your benefit
	☐ Yes. Gi	ve specific informa	tion about them		
26				and other intellectual property seds from royalties and licensing agreements	
		ve specific informa	tion about them		
27			other general intangib exclusive licenses, coo	oles operative association holdings, liquor licenses, professional licenses	
	☐ Yes. Gi	ve specific informa	tion about them		
Off	ficial Form 1	06A/B		Schedule A/B: Property	page 5

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Debtor 1 Debtor 2	Cheryl A. Steed Trevor A. Steed		Case number (if known)	
Money or	property owed to you?			Current value of the portion you own?
				Do not deduct secured claims or exemptions.
■ No	efunds owed to you . Give specific information a	bout them, including whether you already	r filed the returns and the tax years	
■ No	nples: Past due or lump sun		maintenance, divorce settlement, property	settlement
☐ Yes.	. Give specific information			
			s, sick pay, vacation pay, workers' compe	nsation, Social Security
☐ Yes.	. Give specific information.			
	sts in insurance policies aples: Health, disability, or li	fe insurance; health savings account (HS	A); credit, homeowner's, or renter's insurar	nce
■ Yes.		any of each policy and list its value. npany name:	Beneficiary:	Surrender or refund value:
	Но	meowners Insurance.		Unknown
	Ca	Insurance.		Unknown
If you		due you from someone who has died ng trust, expect proceeds from a life insur	ance policy, or are currently entitled to rec	eive property because
■ No				
☐ Yes.	. Give specific information.			
		nether or not you have filed a lawsuit on the disputes, insurance claims, or rights to		
Yes.	. Describe each claim			
		Workers' Compenstion Claim disability	pending hearing on permanent	Unknown
34. Other	contingent and unliquida	ted claims of every nature, including c	ounterclaims of the debtor and rights to	set off claims
■ No □ Yes	. Describe each claim			
	nancial assets you did no			
■ No	-			
☐ Yes.	. Give specific information.			
	the dollar value of all of y	our entries from Part 4, including any	entries for pages you have attached	\$4,338.39

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				•	
Debtor Debtor		Cheryl A. Steed Trevor A. Steed		Case number (if known)	
Part 5:	Des	cribe Any Business-Related Property You Own or Have an Inter	est In. List any real esta	ate in Part 1.	
37. Do 1	you o	wn or have any legal or equitable interest in any business-relate	ed property?		
■ No	o. Go	to Part 6.			
☐ Ye	es. Go	to line 38.			
Part 6:		cribe Any Farm- and Commercial Fishing-Related Property You u own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
	•	own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	No. C	Go to Part 7.			
	Yes.	Go to line 47.			
Part 7:		Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
E)	xampi No	have other property of any kind you did not already list les: Season tickets, country club membership Sive specific information	ę		
54. A	dd th	ne dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part 8:	I	List the Totals of Each Part of this Form			
55. P	art 1:	Total real estate, line 2			\$212,373.00
56. P	art 2:	: Total vehicles, line 5	\$8,351.00		
57. P	art 3:	: Total personal and household items, line 15	\$3,250.00		
58. P	art 4:	: Total financial assets, line 36	\$4,338.39		
59. P	art 5	: Total business-related property, line 45	\$0.00		
60. P	art 6:	: Total farm- and fishing-related property, line 52	\$0.00		
61. P	art 7:	: Total other property not listed, line 54 +	\$0.00		
62. T	otal p	personal property. Add lines 56 through 61	\$15,939.39	Copy personal property total	\$15,939.39
63. T	otal	of all property on Schedule A/B. Add line 55 + line 62			\$228,312.39

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Fill in this infor					
Debtor 1	Cheryl A. Steed				
	First Name	Middle Name	Last Name		
Debtor 2	Trevor A. Steed				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF MARYLAND			
Case number (if known)					Check if this is an
_					☐ Check if this is amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemptions are	you claiming?	? Check one only	, even if	your spouse is filin	g with	you.
----	-----------------------------	---------------	------------------	-----------	----------------------	--------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
902 Bridgers Street Henderson, NC 27536 Vance County	\$15,500.00	\$12,000.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)
Line from Schedule A/B: 1.3		100% of fair market value, up to any applicable statutory limit	1100. 3 11 004(5)(0)
2012 Honda Accord Line from Schedule A/B: 3.1	\$6,669.00	\$1,545.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
Ellie Holli Genedale FAB. G. 1		100% of fair market value, up to any applicable statutory limit	1100. § 11 004(1)(1)(1)(1)
1999 Buick Century 82000 miles	\$1,682.00	\$1,682.00	Md. Code Ann., Cts. & Jud Proc. § 11-504(f)(1)(i)(1)
Line from Schedule AVD. 3.2		100% of fair market value, up to any applicable statutory limit	1100. 3 11 304(1)(1)(1)(1)
Sofa, chairs, beds, kitchen set, dining room set,	\$2,000.00	\$2,000.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)
cookware/dishes/glasses, blankets/linens, small/kitchen appliances, etc Line from Schedule A/B: 6.1		100% of fair market value, up to any applicable statutory limit	
Televisions, cellphone, etc.	\$1,000.00	\$1,000.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
LING HOLLI SCHEUUIG PAD. 1.1		100% of fair market value, up to any applicable statutory limit	1100. 8 11-30-(1)(1)(1)(1)

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Debtor Debtor				Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	atches, rings, bracelets, necklaces, endants, etc.	\$250.00		\$250.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
	ne from <i>Schedule A/B</i> : 12.1			100% of fair market value, up to any applicable statutory limit	
	hecking: Wells Fargo. Account no. * 6068	\$808.01		\$808.01	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
Liı	ne from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	hecking: PNC. Account no. ***9817.	\$3,509.49		\$3,509.49	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
				100% of fair market value, up to any applicable statutory limit	
	hecking: State Farm Federal Credit	\$20.89		\$20.89	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
	ne from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
	omeowners Insurance.	Unknown		100%	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2)
Σ.,	io noni concadio / v.z. c i v			100% of fair market value, up to any applicable statutory limit	
_	ar Insurance.	Unknown		100%	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2)
				100% of fair market value, up to any applicable statutory limit	3 · · · · · · · · · · · · · · · · · · ·
	orkers' Compenstion Claim ending hearing on permanent	Unknown		100%	Md. Code Ann., Lab. & Empl. § 9-732
di	sability ne from <i>Schedule A/B</i> : 33.1			100% of fair market value, up to any applicable statutory limit	
	re you claiming a homestead exemption of ubject to adjustment on 4/01/19 and every 3			led on or after the date of adjustmer	nt.)
	Yes. Did you acquire the property covere ☐ No ☐ Yes	ed by the exemption wi	thin 1	,215 days before you filed this case	?

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Fill in this	s information	n to identif	y your	case:				
Debtor 1	CI	heryl A. S	teed					
		st Name	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Middle Name	Last Name		-	
Debtor 2	Tr	evor A. S	teed					
(Spouse if, fili	ing) Firs	st Name		Middle Name	Last Name			
United Sta	ates Bankrup	tcy Court fo	or the:	DISTRICT OF MARYLAND				
Case num	nber							
(if known)							☐ Check	if this is an
							ameno	led filing
O((;-;-)	C 40	\cD						
	Form 10							
Sched	dule D:	Credit	ors	Who Have Claims	Secure	ed by Propert	у	12/15
	copy the Addi			two married people are filing togetl ut, number the entries, and attach it				
1. Do any cr	reditors have	claims secu	red by	your property?				
☐ No.	. Check this I	box and su	bmit th	is form to the court with your other	r schedules.	You have nothing else t	o report on this form.	
_	s. Fill in all of			·		ŭ	•	
				elow.				
Part 1:	List All Sec	ured Clain	ns			. Column A	Column B	Column C
				ore than one secured claim, list the cre a particular claim, list the other creditor		ely	Value of collateral	Unsecured
				al order according to the creditor's nan		Do not deduct the	that supports this	portion
	. (! (- 1 0 .					value of collateral.	claim	If any
1211	ntinental Ce dit Inc.	entrai		Describe the property that secures	the claim:	\$800.00	\$5,000.00	\$800.00
	tor's Name			The Colonies at Williamsbu		1		
				Williamsburg, VA 23188	9			
				Williamsburg City County				
			Į	Tri yearly				
561 ⁻	1 Palmer W	Vay Ste G	i	As of the date you file, the claim is: apply.	: Check all that			
Carl	Isbad, CA 9	92010		Contingent				
Numb	er, Street, City, S	State & Zip Coo	le	Unliquidated				
				☐ Disputed				
Who owes	s the debt? C	heck one.		Nature of lien. Check all that apply.				
Debtor 1	•			An agreement you made (such as	mortgage or	secured		
Debtor 2	•			car loan)				
_	1 and Debtor 2	-		☐ Statutory lien (such as tax lien, me	echanic's lien)			
	one of the deb		other	☐ Judgment lien from a lawsuit	Maintana	F		
	if this claim re unity debt	elates to a		■ Other (including a right to offset)	waintena	ince Fees		
Date debt v	was incurred			Last 4 digits of account num	nber <u>6969</u>	9		
2.2 Rus	shmore Lm	9		Describe the property that secures	the claim	\$300,416.00	\$191,873.00	\$108,543.00
	tor's Name	3		15751 Millbrook Lane Laure		\	Ψ131,073.00	Ψ100,545.00
				20707 Prince Georges Cou				
				_	-			
	52708			As of the date you file, the claim is: apply.	Check all that			
Irvir	ne, CA 926	19		☐ Contingent				
Numb	er, Street, City, S	State & Zip Coo	le	☐ Unliquidated				
\A//a =	- 4h J-1-10 -			Disputed				
	s the debt? C	neck one.		Nature of lien. Check all that apply.				
Debtor 1	•			An agreement you made (such as car loan)	mortgage or s	secured		
Debtor 2	-				achaniala liar\			
_	1 and Debtor 2	-	41-	Statutory lien (such as tax lien, me	scriariic's lien)			
	one of the deb		otner	Judgment lien from a lawsuit	Mortgage	a		
	if this claim re unity debt	ะเสเซอ โป ส		Other (including a right to offset)	- Horigaye			

Official Form 106D

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Debtor 1 Cheryl A. Steed		e number (if know)		
First Name Middle N Debtor 2 Trevor A. Steed	ame Last Name			
First Name Middle N	ame Last Name			
Opened 10/26/06 Last Active 12/11/17	Last 4 digits of account number 2007			
2.3 Suntrust Bk	Describe the property that secures the claim:	\$5,124.00	\$6,669.00	\$0.00
Creditor's Name	2012 Honda Accord		- + + + + + + + + + + + + + + + + + + +	70-00
Po Box 85052 Richmond, VA 23285	As of the date you file, the claim is: Check all that apply.			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	\square An agreement you made (such as mortgage or secured car loan)			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
\square At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Purchase Mon	ey Security		
Opened 07/12 Last Active 8/29/18	Last 4 digits of account number 2427			
07/12 Last Active	Last 4 digits of account number 2427 Describe the property that secures the claim:	\$8,482.52	\$5,000.00	\$3,482.52
Date debt was incurred 2.4 Williamsburg Plantation, Inc Creditor's Name 5380 Olde Towne Road	Describe the property that secures the claim: The Colonies at Williamsburg Williamsburg, VA 23188 Williamsburg City County Tri yearly As of the date you file, the claim is: Check all that apply.	\$8,482.52	\$5,000.00	\$3,482.52
Date debt was incurred 2.4 Williamsburg Plantation, Inc Creditor's Name 5380 Olde Towne Road Williamsburg, VA 23188	Describe the property that secures the claim: The Colonies at Williamsburg Williamsburg, VA 23188 Williamsburg City County Tri yearly As of the date you file, the claim is: Check all that apply. Contingent	\$8,482.52	\$5,000.00	\$3,482.52
Date debt was incurred 2.4 Williamsburg Plantation, Inc Creditor's Name 5380 Olde Towne Road	Describe the property that secures the claim: The Colonies at Williamsburg Williamsburg, VA 23188 Williamsburg City County Tri yearly As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$8,482.52	\$5,000.00	\$3,482.52
Date debt was incurred 2.4 Williamsburg Plantation, Inc Creditor's Name 5380 Olde Towne Road Williamsburg, VA 23188	Describe the property that secures the claim: The Colonies at Williamsburg Williamsburg, VA 23188 Williamsburg City County Tri yearly As of the date you file, the claim is: Check all that apply. Contingent	\$8,482.52	\$5,000.00	\$3,482.52
Date debt was incurred 2.4 Williamsburg Plantation, Inc Creditor's Name 5380 Olde Towne Road Williamsburg, VA 23188 Number, Street, City, State & Zip Code	Describe the property that secures the claim: The Colonies at Williamsburg Williamsburg, VA 23188 Williamsburg City County Tri yearly As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured)		\$5,000.00	\$3,482.52
Date debt was incurred 2.4 Williamsburg Plantation, Inc Creditor's Name 5380 Olde Towne Road Williamsburg, VA 23188 Number, Street, City, State & Zip Code Who owes the debt? Check one.	Describe the property that secures the claim: The Colonies at Williamsburg Williamsburg, VA 23188 Williamsburg City County Tri yearly As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.		\$5,000.00	\$3,482.52
Date debt was incurred 2.4 Williamsburg Plantation, Inc Creditor's Name 5380 Olde Towne Road Williamsburg, VA 23188 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Describe the property that secures the claim: The Colonies at Williamsburg Williamsburg, VA 23188 Williamsburg City County Tri yearly As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)		\$5,000.00	\$3,482.52
Date debt was incurred 2.4 Williamsburg Plantation, Inc Creditor's Name 5380 Olde Towne Road Williamsburg, VA 23188 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Describe the property that secures the claim: The Colonies at Williamsburg Williamsburg, VA 23188 Williamsburg City County Tri yearly As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit		\$5,000.00	\$3,482.52
Date debt was incurred 2.4 Williamsburg Plantation, Inc Creditor's Name 5380 Olde Towne Road Williamsburg, VA 23188 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Describe the property that secures the claim: The Colonies at Williamsburg Williamsburg, VA 23188 Williamsburg City County Tri yearly As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)		\$5,000.00	\$3,482.52
Date debt was incurred 2.4 Williamsburg Plantation, Inc Creditor's Name 5380 Olde Towne Road Williamsburg, VA 23188 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	Describe the property that secures the claim: The Colonies at Williamsburg Williamsburg, VA 23188 Williamsburg City County Tri yearly As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit		\$5,000.00	\$3,482.52
Date debt was incurred 2.4 Williamsburg Plantation, Inc Creditor's Name 5380 Olde Towne Road Williamsburg, VA 23188 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	Describe the property that secures the claim: The Colonies at Williamsburg Williamsburg, VA 23188 Williamsburg City County Tri yearly As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Mortgage		\$5,000.00	\$3,482.52
Date debt was incurred 2.4 Williamsburg Plantation, Inc Creditor's Name 5380 Olde Towne Road Williamsburg, VA 23188 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred	Describe the property that secures the claim: The Colonies at Williamsburg Williamsburg, VA 23188 Williamsburg City County Tri yearly As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Mortgage		\$5,000.00	\$3,482.52

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Debto	1 Cheryl A. Ste	ed		Case number (if know)
	First Name	Middle Name	Last Name	
Debto	2 Trevor A. Ste	ed		
	First Name	Middle Name	Last Name	
	Loan Acquisition	-	vices	On which line in Part 1 did you enter the creditor? 2.2 Last 4 digits of account number
	Name, Number, Street, Rushmore Lms Attn: Bankruptcy Po Box 55004 Irvine, CA 92619	, City, State & Zip Code		On which line in Part 1 did you enter the creditor?
	Suntrust Bk Attn: Bankruptcy	/W-6290 PO Box 8509	92	On which line in Part 1 did you enter the creditor? Last 4 digits of account number

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	Case	10-23109 DUC	i illed 10/03/10	0 1 age 22 01 00	
Fill in this inf	formation to identify your	case:			
Debtor 1	Cheryl A. Steed				
Debior	First Name	Middle Name	Last Name		
Debtor 2	Trevor A. Steed				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	DISTRICT OF MARYL	AND		
Case number					
(if known)					Check if this is an
					amended filing
Official Fo	orm 106E/F				
	E/F: Creditors W	ho Havo Uneoc	urad Claime		12/15
				for creditors with NONPRIORITY cla	
left. Attach the on the case	Continuation Page to this pag number (if known).	e. If you have no informati		art you need, fill it out, number the er t file that Part. On the top of any add	
	t All of Your PRIORITY Un				
_ `	editors have priority unsecure	d claims against you?			
No. Go	to Part 2.				
☐ Yes.					
Part 2: Lis	t All of Your NONPRIORIT	Y Unsecured Claims			
3. Do any cre	editors have nonpriority unsec	ured claims against you?			
☐ No. You	have nothing to report in this p	art. Submit this form to the c	ourt with your other schedules	5.	
Yes.					
■ res.					
unsecured	claim, list the creditor separately	for each claim. For each cla	aim listed, identify what type o	Is each claim. If a creditor has more the f claim it is. Do not list claims already in a nonpriority unsecured claims fill out the	cluded in Part 1. If more
					Total claim
4.1 Acke	erman Security Systems	Last 4 digit	s of account number 86	79	\$200.00
	iority Creditor's Name		<u></u>		Ψ200.00
	Box 933374	When was	the debt incurred?		_
	nta, GA 31193-3374 er Street City State Zlp Code		ate you file, the claim is: Ch	ack all that apply	
	ncurred the debt? Check one.	A3 Of the u	ate you me, the claim is.	eck all that apply	
_	btor 1 only	☐ Continge	ont		
_	btor 2 only	☐ Unliquid			
	btor 1 and Debtor 2 only	☐ Disputed			
	least one of the debtors and and	_ '	ı NPRIORITY unsecured clai	m:	
	eck if this claim is for a com	Па:			
debt	GON II UIIS CIAIIII IS IUI A COIIII	<u> </u>	ons arising out of a separation	agreement or divorce that you did not	
Is the	claim subject to offset?	report as pr		<u> </u>	
■ No		☐ Debts to	pension or profit-sharing plar	ns, and other similar debts	
☐ Ye	s	Other. S	pecify Charged Accou	ınt	

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	or 2 Trevor A. Steed		Case number (if know)	
4.2	Ameri Mark Premier Nonpriority Creditor's Name P.O Box 2845	Last 4 digits of account number When was the debt incurred?	5004	\$131.91
	Monroe, WI 53566-8045 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	Other. Specify		
4.3	Barclays Bank Delaware	Last 4 digits of account number	5396	\$4,332.00
	Nonpriority Creditor's Name P.o. Box 8803 Wilmington, DE 19899	When was the debt incurred?	Opened 09/13 Last Active 6/28/18	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	Other. Specify Credit Care	1	
4.4	BGE	Last 4 digits of account number		Unknown
	Nonpriority Creditor's Name 2 Center Plaza	When was the debt incurred?		
	110 West Fayette Street Baltimore, MD 21201			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	П		
	Debtor 2 only	☐ Contingent		
	<u> </u>	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alains	
	At least one of the debtors and another	Type of NONPRIORITY unsecure ☐ Student loans	a ciaim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	No	Debts to pension or profit-shari	ng plans, and other similar debts	
	■ No □ Yes	Other. Specify Utility	.g p.as, and outer official dobte	
	□ 103	Other. Specify		

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	r 2 Trevor A. Steed		Case number (if know)	
4.5	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	8445	\$3,555.00
	15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	Opened 09/14 Last Active 7/27/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.6	Citibank/Sears Nonpriority Creditor's Name	Last 4 digits of account number	7801	\$1,604.00
	Po Box 6282 Sioux Falls, SD 57117	When was the debt incurred?	Opened 05/16 Last Active 8/26/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.7	Citibank/Sears Nonpriority Creditor's Name	Last 4 digits of account number	7531	\$748.00
	Po Box 6283 Sioux Falls, SD 57117	When was the debt incurred?	Opened 05/16 Last Active 8/26/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card	<u> </u>	

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Debtor Debtor	1 Cheryl A. Steed 2 Trevor A. Steed		Case number (if know)	
4.8	Comenity Bank/Ashley Stewart Nonpriority Creditor's Name	Last 4 digits of account number	4777	\$122.00
	Po Box 182789 Columbus, OH 43218	When was the debt incurred?	Opened 04/17 Last Active 8/23/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify Charge Acc	count	
4.9	Comenity Capital Bank/PayPal Nonpriority Creditor's Name	Last 4 digits of account number	4146	\$195.92
	P.O Box 5138 Lutherville Timonium, MD 21094-5138	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	i ciaim:	
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charged Ac	ccount	
4.1	Comenity/ MPRC Nonpriority Creditor's Name	Last 4 digits of account number	5306	\$103.00
	Po Box 182120 Columbus, OH 43218	When was the debt incurred?	Opened 10/16 Last Active 8/24/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Charge Acc	count	

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	r 1 Cheryl A. Steed r 2 Trevor A. Steed		Case number (if know)	
4.1	Comenity/ MPRC	Last 4 digits of account number	4808	\$105.00
	Nonpriority Creditor's Name Po Box 182120 Columbus OH 42218	When was the debt incurred?	Opened 03/17 Last Active 9/01/18	
	Columbus, OH 43218 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.1	Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	4600	\$2,735.00
	Po Box 98875 Las Vegas, NV 89193	When was the debt incurred?	Opened 10/11 Last Active 5/23/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card		
4.1	Dr. Scott Fisher, D.D.S Nonpriority Creditor's Name	Last 4 digits of account number	2432	\$814.50
	15C Street Laurel, MD 20707	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Medical bill	<u>. </u>	

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Debtor Debtor	Cheryl A. Steed Trevor A. Steed		Case number (if know)	
4.1	First Premier Bank	Last 4 digits of account number	6271	\$987.00
	Nonpriority Creditor's Name 601 S Minnesota Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 06/17 Last Active 7/12/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed	Labeton	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card		
4.1 5	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number	0547	\$715.00
	601 S Minnesota Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 08/15 Last Active 7/12/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card		
4.1 6	First Saving Bank / Blaze Nonpriority Creditor's Name	Last 4 digits of account number	8139	\$382.00
	5501 S Broadband Ln Sioux Falls, SD 57108	When was the debt incurred?	Opened 07/15 Last Active 7/27/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	■ No □ Yes			
	□ res	■ Other. Specify Credit Card	·	

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Debt Debt	or 1 Cheryl A. Steed or 2 Trevor A. Steed		Case number (if know)	
4.1 7	Ginny's	Last 4 digits of account number	4630	\$243.75
	Nonpriority Creditor's Name 1112 7th Avenue Monroe, WI 53566-1364	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	<u> </u>	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debts	
	■ No □ Yes		g pians, and other similar debts	
4.1 8	Kohl's	Last 4 digits of account number	4801	\$662.59
	Nonpriority Creditor's Name P.O Box 2983	When was the debt incurred?		
	Milwaukee, WI 53201-2983	_		
	Number Street City State ZIp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d alaim.	
	At least one of the debtors and another	Student loans	a ciaim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□ Yes		g pranti, and the similar desid	
4.1 9	Kohls/Capital One Nonpriority Creditor's Name	Last 4 digits of account number	5248	\$662.00
	N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051	When was the debt incurred?	Opened 04/14 Last Active 8/21/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	

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	or 1 Cheryl A. Steed Trevor A. Steed		Case number (if know)	
4.2 0	Merrick Bank/CardWorks	Last 4 digits of account number	4548	\$1,396.00
	Nonpriority Creditor's Name Pob 9201 Old Bethpage, NY 11804	When was the debt incurred?	Opened 07/15 Last Active 8/28/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharing ☐ Other. Specify ☐ Credit Card		
4.2	Merrick Bank/CardWorks Nonpriority Creditor's Name	Last 4 digits of account number	5411	\$1,281.00
	Po Box 9201 Old Bethpage, NY 11804	When was the debt incurred?	Opened 08/15 Last Active 8/28/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Carc		
		Other. Specify	·	
4.2	Montgomery Ward Nonpriority Creditor's Name	Last 4 digits of account number	4290	\$1,173.87
	1112 7th Avenue Monroe, WI 53566-1364 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim in	S. Chack all that apply	
	Who incurred the debt? Check one.		э. Опеск ан шасарргу	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	1 claim:	
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt	☐ Student loans	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin		
	☐ Yes	Other. Specify	· 	

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Old Navy	Last 4 digits of account number 2641	\$31.6
Nonpriority Creditor's Name P.O Box 530942	When was the debt incurred?	_
Atlanta, GA 30353-0942 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	no of the date you me, the stammes officer all that apply	
■ Debtor 1 only	Contingent	
Debtor 2 only	□ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did no report as priority claims	ot
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Credit card.	_
Receivable Management Inc	Last 4 digits of account number 6184	\$849.0
Nonpriority Creditor's Name 7206 Hull Street Rd Ste	When was the debt incurred? Opened 11/13	<u>·</u>
North Chesterfield, VA 23235 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did no	ot
s the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Collection Attorney Patient First	
Seventh Avenue	Last 4 digits of account number 4548	\$665.9
Nonpriority Creditor's Name		
1112 7th Avenue	When was the debt incurred?	<u> </u>
Monroe, WI 53566-1364 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did no report as priority claims	ot
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	

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Syncb/marlo Furniture	Last 4 digits of account number	9192	\$625.00
Nonpriority Creditor's Name		Opened 10/14 Last Active	
950 Forrer Blvd Kettering, OH 45420	When was the debt incurred?	6/28/18	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Charge Acc	count	
Syncb/mattress Warehou	Last 4 digits of account number	3366	\$717.00
Nonpriority Creditor's Name			Ψ111.00
950 Forrer Blvd Kettering, OH 45420	When was the debt incurred?	Opened 10/17 Last Active 9/13/18	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	Other. Specify Charge Acc	count	
Synchrony Bank/ JC Penneys	Last 4 digits of account number	9081	\$55.00
Nonpriority Creditor's Name	_		
Po Box 965007 Orlando, FL 32896	When was the debt incurred?	Opened 06/18 Last Active 8/19/18	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	■ Other. Specify Charge Acc	count	

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Synchrony Bank/ Old Navy Nonpriority Creditor's Name	Last 4 digits of account number	2641	\$31.0
Po Box 965005 Orlando, FL 32896	When was the debt incurred?	Opened 03/16 Last Active 6/28/18	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Charge Acc		
	— Other. Opedity		
Synchrony Bank/Amazon Nonpriority Creditor's Name	Last 4 digits of account number	8564	\$323.
Po Box 965015 Orlando, FL 32896	When was the debt incurred?	Opened 03/13 Last Active 8/21/18	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	□ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Synchrony Bank/Care Credit	Last 4 digits of account number	6167	\$145.
Nonpriority Creditor's Name 950 Forrer Blvd Kettering, OH 45420	When was the debt incurred?	Opened 06/17 Last Active 7/29/18	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
• · · · · · · · · · · · · · · · · · · ·			
Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debts	

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		4000	
Synchrony Bank/Home Shopping Nonpriority Creditor's Name	Last 4 digits of account number	1026	Unknowr
Po Box 965005 Orlando, FL 32896	When was the debt incurred?	Opened 11/05 Last Active 12/18/08	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Charge Acc	count	
Synchrony Bank/Home Shopping	Last 4 digits of account number	1026	Unknowr
Nonpriority Creditor's Name Po Box 965005 Orlando, FL 32896	When was the debt incurred?	Opened 11/05 Last Active 12/18/08	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharin		
Yes	Other. Specify Charge Acc	count	
Synchrony Bank/Lowes Nonpriority Creditor's Name	Last 4 digits of account number	7669	\$1,130.00
Po Box 956005 Orlando, FL 32896	When was the debt incurred?	Opened 03/16 Last Active 8/28/18	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	<u>-</u> ' '		
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	

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Synchrony Bank/ShopNBC Nonpriority Creditor's Name	Last 4 digits of account number	2177	\$347.00		
Po Box 965005 Orlando, FL 32896	When was the debt incurred?	Opened 10/13 Last Active 8/28/18			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i				
■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured				
☐ Check if this claim is for a community debt Is the claim subject to offset?	□ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account				
No					
☐ Yes					
Synchrony Bank/Walmart	Last 4 digits of account number	2755	\$1,117.00		
Nonpriority Creditor's Name Po Box 965024 Orlando El 33806	When was the debt incurred?	Opened 05/15 Last Active 8/23/18			
Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i				
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured				
Check if this claim is for a community	Student loans				
debt s the claim subject to offset? —	☐ Obligations arising out of a sepa report as priority claims				
No	Debts to pension or profit-sharin				
Yes	Other. Specify Charge Acc	count			
Synchrony Bank/Walmart Nonpriority Creditor's Name	Last 4 digits of account number	2755	\$1,166.00		
Po Box 965024 Orlando, FL 32896	When was the debt incurred?	Opened 05/15 Last Active 8/23/18			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured				
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims				
No	Debts to pension or profit-sharin	o plans, and other similar debts			
No	Other. Specify Charge Account				

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Debtor 1 Cheryl A. Steed Debtor 2 Trevor A. Steed			Case number (if know)				
4.3 8	Transworld Sys Inc/33	Last 4 digits of account number	9977	\$221.00			
Nonpriority Creditor's Name 500 Virginia Dr Ste 514 Ft Washington, PA 19034 Number Street City State Zlp Code Who incurred the debt? Check one.	Opened 04/14 Last Active 3/06/15						
	Number Street City State Zlp Code	As of the date you file, the claim i					
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	■ No	☐ Debts to pension or profit-sharin					
	☐ Yes	Collection A Physicians					
4.3	US Deptartment of Education/Great Lakes	Last 4 digits of account number	8581	\$79,547.00			
	Nonpriority Creditor's Name	-	On an ad 40/05/44 Look Active				
	2401 International Lane Madison, WI 53704	When was the debt incurred?	Opened 10/05/11 Last Active 7/31/18				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i					
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims					
	No	Debts to pension or profit-sharin					
	■ No	_					
	☐ Yes	☐ Other. Specify Educationa					
		Luucationa					
4.4 0	Walmart Nonpriority Creditor's Name	Last 4 digits of account number	2755	\$1,117.11			
	P.O Box 530927 Atlanta, GA 30353-0927	When was the debt incurred?					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	Other. Specify					

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Debtor Debtor	1 Cheryl A. Steed2 Trevor A. Steed		Case number (if kn	now)			
4.4							
1	Wells Fargo Bank Nonpriority Creditor's Name	Last 4 digits of account number	1520		\$8,597.00		
	Credit Bureau Dispute Resoluti Des Moines, IA 50306	When was the debt incurred?	Opened 09/13 8/22/18	Last Active	-		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that appl	у			
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	Obligations arising out of a sep	aration agreement or o	divorce that you did not			
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-shari	ng plans, and other sin	nilar debts			
	☐ Yes	■ Other. Specify Credit Card					
Part 3:	List Others to Be Notified About a Do	ebt That You Already Listed					
is tryi have r	nis page only if you have others to be notified ng to collect from you for a debt you owe to s more than one creditor for any of the debts th ed for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor in at you listed in Parts 1 or 2, list the add	n Parts 1 or 2, then lis	st the collection agency	y here. Similarly, if you		
Name a	nd Address	On which entry in Part 1 or Part 2 did you	u list the original credite	or?			
	ays Bank Delaware	Line 4.3 of (Check one):	☐ Part 1: Creditors with	h Priority Unsecured Cla	ims		
	Correspondence	I	Part 2: Creditors with	h Nonpriority Unsecured	Claims		
	x 8801 ngton, DE 19899						
***************************************		Last 4 digits of account number					
Name a	nd Address	On which entry in Part 1 or Part 2 did you	u list the original credite	or?			
Capita		Line <u>4.5</u> of (<i>Check one</i>):	Part 1: Creditors with	h Priority Unsecured Cla	ims		
	Bankruptcy x 30285		Part 2: Creditors with	h Nonpriority Unsecured	Claims		
	ake City, UT 84130						
J		Last 4 digits of account number					
Name a	nd Address	On which entry in Part 1 or Part 2 did you					
	nk/Sears	Line <u>4.6</u> of (<i>Check one</i>):	Part 1: Creditors with	h Priority Unsecured Cla	ims		
	Bankruptcy ox 6275		Part 2: Creditors with	h Nonpriority Unsecured	Claims		
	Falls, SD 57117						
O.Gun		Last 4 digits of account number					
	nd Address	On which entry in Part 1 or Part 2 did you	u list the original credit	or?			
	nk/Sears			h Priority Unsecured Cla			
	alized Bankruptcy x 790034		Part 2: Creditors with	h Nonpriority Unsecured	Claims		
	uis, MO 63179						
01 201	210, 1110 00110	Last 4 digits of account number					
Name a	nd Address	On which entry in Part 1 or Part 2 did you	u list the original credite	or?			
	nity Bank/Ashley Stewart	Line 4.8 of (Check one):	☐ Part 1: Creditors with	h Priority Unsecured Cla	ims		
	Bankruptcy Dept	ı	Part 2: Creditors with	h Nonpriority Unsecured	Claims		
	ox 182125 nbus, OH 43218						
Coluit	1543, O11 45210	Last 4 digits of account number					
Name a	nd Address	On which entry in Part 1 or Part 2 did you	u list the original creditor	or?			
	nity/ MPRC		_	h Priority Unsecured Cla	ims		
	Bankruptcy			h Nonpriority Unsecured			
	x 182125			, , , , , , , , , , , , , , , , , , , ,	-		
Colum	nbus, OH 43218	Last 4 digits of account number					
		• • • • • • • • • • • • • • • • • • • •					

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Debtor 1 Cheryl A. Steed Debtor 2 Trevor A. Steed		Case number (if know)
Name and Address Comenity/ MPRC Attn: Bankruptcy Po Box 182125	On which entry in Part 1 or Part 2 did the Line 4.11 of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Columbus, OH 43218	Last 4 digits of account number	
Name and Address Credit One Bank Attn: Bankruptcy Po Box 98873 Las Vegas, NV 89193	On which entry in Part 1 or Part 2 did y Line 4.12 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address First Premier Bank Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117	On which entry in Part 1 or Part 2 did y Line 4.14 of (<i>Check one</i>):	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address First Premier Bank Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117	On which entry in Part 1 or Part 2 did y Line 4.15 of (<i>Check one</i>): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address First Saving Bank / Blaze Attn: Bankruptcy Po Box 5096 Sioux Falls, SD 57117	On which entry in Part 1 or Part 2 did y Line 4.16 of (Check one):	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Kohls/Capital One Kohls Credit Po Box 3120 Milwaukee, WI 53201	On which entry in Part 1 or Part 2 did y Line 4.19 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Merrick Bank P.O Box 660702 Dallas, TX 75266-0702	On which entry in Part 1 or Part 2 did y Line 4.25 of (Check one): Last 4 digits of account number	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 did y	you list the original creditor?
Merrick Bank/CardWorks Attn: Bankruptcy Po Box 9201 Old Bethpage, NY 11804	Line 4.20 of (Check one):	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Merrick Bank/CardWorks Attn: Bankruptcy Po Box 9201 Old Bethpage, NY 11804	On which entry in Part 1 or Part 2 did y Line 4.21 of (<i>Check one</i>):	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Receivable Management Inc 7206 Hull Rd Ste 211	On which entry in Part 1 or Part 2 did the Line 4.24 of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Richmond, VA 23235	Last 4 digits of account number	

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Debtor 1 Cheryl A. Steed Debtor 2 Trevor A. Steed		Case number (if know)
Name and Address Syncb/marlo Furniture Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	On which entry in Part 1 or Part 2 di Line 4.26 of (Check one):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
, 	Last 4 digits of account number	
Name and Address Syncb/mattress Warehou Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	On which entry in Part 1 or Part 2 d Line 4.27 of (<i>Check one)</i> :	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Synchrony Bank/ JC Penneys Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	On which entry in Part 1 or Part 2 di Line 4.28 of (Check one):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Synchrony Bank/ Old Navy Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	On which entry in Part 1 or Part 2 de Line 4.29 of (<i>Check one</i>): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 di	id you list the original creditor?
Synchrony Bank/Amazon Attn: Bankruptcy Dept Po Box 965060	Line 4.30 of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Orlando, FL 32896	Last 4 digits of account number	
Name and Address Synchrony Bank/Care Credit Attn: Bankruptcy Dept Po Box 965061 Orlando, FL 32896	On which entry in Part 1 or Part 2 de Line 4.31 of (Check one):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Synchrony Bank/Home Shopping Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	On which entry in Part 1 or Part 2 d Line 4.32 of (<i>Check one)</i> :	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Onando, 1 E 32330	Last 4 digits of account number	
Name and Address Synchrony Bank/Home Shopping Attn: Bankruptcy Dept Po Box 965060	On which entry in Part 1 or Part 2 di Line 4.33 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Orlando, FL 32896	Last 4 digits of account number	
Name and Address Synchrony Bank/Lowes Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	On which entry in Part 1 or Part 2 di Line 4.34 of (Check one):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Synchrony Bank/ShopNBC Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	On which entry in Part 1 or Part 2 di Line 4.35 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

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Debtor 1 Cheryl A. Steed Debtor 2 Trevor A. Steed	Case number (if know)			
	Last 4 digits of account number			
Name and Address Synchrony Bank/Walmart Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	On which entry in Part 1 or Part 2 did y Line 4.36 of (Check one):	vou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number			
Name and Address Synchrony Bank/Walmart Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	On which entry in Part 1 or Part 2 did y Line 4.37 of (<i>Check one</i>):	vou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number			
Name and Address Transworld Sys Inc/33 Attn: Compliance Dept Po Box 15630 Wilmington, DE 19850	On which entry in Part 1 or Part 2 did y Line 4.38 of (Check one): Last 4 digits of account number	vou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims		
Name and Address		iou liet the prining are diter?		
US Deptartment of Education/Great Lakes Attn: Bankruptcy Po Box 7860 Madison, WI 53707	On which entry in Part 1 or Part 2 did y Line 4.39 of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number			
Name and Address Wells Fargo Bank Attn: Bankruptcy Dept Po Box 6429 Greenville, SC 29606	On which entry in Part 1 or Part 2 did y Line 4.41 of (Check one):	vou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number			

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				1	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.		Total Claim
Total	oi.	Student loans	OI.	\$	79,547.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.		6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	39,287.18
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	118,834.18

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Fill in this infor	mation to identify your	case:		1
Debtor 1	Cheryl A. Steed			l
	First Name	Middle Name	Last Name	 1
Debtor 2	Trevor A. Steed			
(Spouse if, filing)	First Name	Middle Name	Last Name	1
United States Bankruptcy Court for the: DISTRICT OF MARYLAND				
Case number				l
(if known)				Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1		·	•		
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	Oity		Otate	Zii Code	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4			<u> </u>		
	Name				<u> </u>
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5	- ity		<u> </u>	211 0000	
	Name				_
	Number	Street			
	City		State	ZIP Code	_

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	Case	10 20 100 000	1 11100 107007	io rago iroro	
Fill in this i	nformation to identify your	case:			
Debtor 1	Cheryl A. Steed				
	First Name	Middle Name	Last Name		
Debtor 2	Trevor A. Steed	ACT III AT			
(Spouse if, filing	first Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	DISTRICT OF MARYLA	AND		
Case numb	er				
(if known)					☐ Check if this is an
					amended filing
Official	Form 106H				
	ule H: Your Cod	ahtars			12/15
Scried	ule II. Toul Cou	<u>enrois</u>			12/15
our name a	ou have any codebtors? (If). Answer every question	1.		of any Additional Pages, write
■ No					
☐ Yes					
	in the last 8 years, have you , California, Idaho, Louisiana				states and territories include
■ No. (Go to line 3.				
☐ Yes.	Did your spouse, former spo	use, or legal equivalent liv	e with you at the time?		
in line	2 again as a codebtor only i 06D), Schedule E/F (Officia	if that person is a guarar	ntor or cosigner. Make	sure you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	column 1: Your codebtor ame, Number, Street, City, State and Z	IP Code		Column 2: The cred Check all schedules	itor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
	ame			Schedule E/F, line	 e
				☐ Schedule G, line	<u> </u>
N	umber Street			_	
	ity	State	ZIP Code		
3.2				☐ Schedule D, line	
	ame			_ ☐ Schedule D, line ☐ Schedule E/F, line	
				☐ Schedule G, line	
	umber Street				
	umber Street ity	State	ZIP Code		

Schedule H: Your Codebtors

						_				
	in this information to identify your of the control									
	<u> </u>				_					
	otor 2 Trevor A. S	teed			_					
Uni	ted States Bankruptcy Court for the	e: DISTRICT OF MARY	LAND							
	se number		_			Check if th	nis is:			
(If kn	nown)					☐ An am		3	g postpetition	chantor
									ollowing date:	
	fficial Form 106l					MM / [DD/ YYY	Ϋ́		
So	chedule I: Your Inc	ome								12/1
Par	t 1: Describe Employment Fill in your employment		ional pages, write yo	our name	e and	d case numbe	er (if kno	own). A	nswer every	question
1.	information.		Debtor 1			Deb	otor 2 o	r non-fil	ling spouse	
	If you have more than one job, attach a separate page with	Employment status	☐ Employed				Employe			
	information about additional employers.		■ Not employed			I	■ Not employed			
	Include part-time, seasonal, or	Occupation	Retired			Ret	tired			
	self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?							
Par	t 2: Give Details About Mo	nthly Income								
	mate monthly income as of the cuse unless you are separated.	late you file this form. If	you have nothing to r	eport for	any	line, write \$0 in	n the sp	ace. Inc	lude your nor	n-filing
	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the informatio	n for all e	empl	oyers for that p	person c	on the lir	nes below. If y	you need
						For Debtor 1	-		otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0	.00	\$	0.00	
3.	Estimate and list monthly over	time pay.		3.	+\$	0	.00	+\$	0.00	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	0.00	0	\$	0.00	

Cheryl A. Steed Debtor 1 Trevor A. Steed Debtor 2 Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse 0.00 Copy line 4 here 0.00 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 5a. 0.00 0.00 Mandatory contributions for retirement plans 5b. 5b. 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 5d. Required repayments of retirement fund loans 5d. \$ 0.00 0.00 5e. Insurance 5e. \$ 0.00 0.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5q. **Union dues** 5q. 0.00 0.00 5h. Other deductions. Specify: 5h.+ 0.00 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 0.00 0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. 0.00 0.00 8. List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$ 0.00 0.00 8h Interest and dividends 8h \$ 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 8e. 8e. 0.00 1,502.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. 0.00 0.00 8g. 8g. Pension or retirement income \$ 1,487.85 \$ 0.00 Other monthly income. Specify: Mother contributes for cable bill 8h.+ \$ 8h. \$ 110.00 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 1,597.85 1,502.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 1.597.85 + \$ 1.502.00 3.099.85 \$ Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 0.00 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 3,099.85 12. \$ applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. П Yes. Explain: Debtor has a pending Workers' Compensation Claim, which is subject to a claim of exemptions. Even if future monthly receipts are added to the budget, the non-filing spouse's social security receipts would not be subject to inclusion in a Chapter 13 calculation.

						1		
Filli	n this informa	ation to identify yo	our case:					
Debt	Cheryl A. Steed						ck if this is:	
Debt (Spo	tor 2 ouse, if filing)	Trevor A. Ste	eed	☐ An amended filing ☐ A supplement showing postpetition chapter 13 expenses as of the following date:				
Unite	ed States Bankı	ruptcy Court for the	: DISTRI	CT OF MARYLAND			MM / DD / YYYY	
	e number nown)							
		orm 106J						
		J: Your						12/1
info	rmation. If m		eded, atta	. If two married people ar ich another sheet to this n.				
Part		ribe Your House	hold					
1.	Is this a joir							
	□ No. Go to		_					
		es Debtor 2 live	in a separ	ate household?				
	■ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	otor 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.					_	☐ Yes
								□ No
					-		_	☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes
3.		penses include of people other t	han	No				
		d your depende		Yes				
Part	- 2: Eatim	oto Vour Ongoi	na Manthi	ly Evnences				
Esti exp	mate your ex	a date after the l	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the	value of suc	h assistance an		government assistance in cluded it on Schedule I: Y			Your exp	ansas
(Off	icial Form 10	וטע.)					Tour exp	011000
4.		or home owners and any rent for th		ses for your residence. In	nclude first mortgag	e 4. :	\$	2,175.00
	If not include	ded in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		erty, homeowner's	s, or renter	's insurance		4b.	·	0.00
				ıpkeep expenses		4c.		150.00
5.		owner's associat		dominium dues our residence , such as ho	me equity loops	4d. 5.	·	207.00 0.00
٥.	Additional	nortgage payin	onio ioi ye	on residence, such as 110	ino equity Idalis	J	Ψ	0.00

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Multilities: Sa. Electricity, heat, natural gas Sa.	Debtor 1 Debtor 2		Cheryl A. Steed Trevor A. Steed	Case number (if known)			
8b. Water, sewer, garbage collection 6c. Telephone, cell phone, thermet, satellite, and cable services 6c. \$ 302.00 8d. Other, Speachy. 7	6.	Utilit	ties:				
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. S 0.00 7. Food and housekeeping supplies 7. \$ 650.00 8. Childcare and children's education costs 8. \$ 0.00 9. Clothing, laundry, and dry cleaning 9. \$ 100.00 10. Personal care products and services 11. \$ 100.00 11. Medical and dental expenses 11. \$ 50.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$ 200.00 13. Entertailment, clubs, recreation, newspapers, magazines, and books 13. \$ 100.00 14. Charitable contributions and religious donations 15. Insurance. 16. Charitable contributions and religious donations 16. Health insurance deducted from your pay or included in lines 4 or 20. 15. Health insurance 15. Vehicle insurance specify: 15. Leath insurance 15. S 285.00 15. Vehicle insurance specify: 15. Car payments for Vehicle 2 17. Installment or lease payments: 17. Car payments for Vehicle 2 17. Other, Specify: 17. Output, Specify: 17. Output, Specify: 17. Other, Specify: 17. Other, Specify: 17. Other, Specify: 17. Other, Specify: 18. \$ 0.00 19. Other payments of vehicle 2 19. Other payments of vehicle 2 19. Other payments of vehicle 2 19. Other payments of vehicle 3 19. Other payments of vehicle 4 19. Other payments of vehicle 5 19. Other payments of vehicle 6 19. Other payments of vehicle 7 19. Other payments of vehicle 8 20. S 0.00 20. Property, homeowner's, or renter's insurance 20. S 0.00 20. Property, homeowner's, or renter's insurance 20. S 0.00 20. Property, homeowner's, or renter's insurance 20. S 0.00 20. Heart payments association or condominium dues 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1. Your thecome. 21. S 0.00 22. Calculate your monthly expenses from your monthly income) from Schedule 1. 23. Capy line 22 (monthly expenses from line 22c		6a.	Electricity, heat, natural gas	6a.	\$	320.00	
6 d. Chher. Specify. 7 Food and housekeeping supplies 8 S 0.00 8 Childcare and children's education costs 8 S 0.00 9 Clothing, laundry, and dry cleaning 9 S \$ 100.00 10 Personal care products and services 10 S 150.00 11 Medical and ental expenses 11 S 50.00 12 Transportation. Include gas, maintenance, bus or train fare. Do not include care payments. 12 \$ 200.00 13 Entertainment, clubs, recreation, newspapers, magazines, and books 13 S 100.00 14 Charitable contributions and religious donations 14 S 0.00 15 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15 Insurance. Do not include insurance device from your pay or included in lines 4 or 20. 15 Letterial insurance 15 S 265.00 15 C 40che insurance. \$pecify. 15 Taxes. Do not include insurance specify. 15 Taxes. Do not include insurance. \$pecify. 16 Taxes. Do not include insurance. \$pecify. 17 Taxes are payments for Vehicle 1 17 Taxes are payments for Vehicle 2 17 Taxes are payments for Vehicle 2 17 Taxes are payments for Vehicle 2 18 Quarter from your pay on line 5, Schedule 1, Your Income (Official Form 106), 100.00 18 Your payments of the first payment for Vehicle 2 20 S Quarter from your pay on line 5, Schedule 1, Your Income (Official Form 106), 20.00 21 Other rap property expenses not included in lines 4 or 5 of this form or on Schedule 1. Your Income. 22 S Quarter from your pay on line 5, Schedule 1, Your Income (Official Form 106), 20.00 21 Other rap property expenses for Debtor 2), if any, from Official Form 106, 2 22 Calculate your monthly expenses from your monthly expenses from your monthly expenses from lone 200.00 23 Calculate your monthly expenses from your monthly expenses from your monthly expenses from lone your monthly inc		6b.	Water, sewer, garbage collection	6b.	\$	0.00	
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23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . 23c. \$\\$ -2,116.15\$ 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No.		23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,099.85	
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The result is your monthly net income. 23c. \$ -2,116.15 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No.							
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No.		23c.		23c.	\$	-2,116.15	
□ res.	24.	For exmodif	xample, do you expect to finish paying for your car loan within the year or do you expect your n ication to the terms of your mortgage? 0.				
		ЦY	es. Explain nere:				

	ormation to identify your	case:		
Debtor 1	Cheryl A. Steed			
	First Name	Middle Name	Last Name	
Debtor 2	Trevor A. Steed			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	DISTRICT OF MARYL	AND	
Case number				
(if known)				☐ Check if this is an amended filing
If two married You must file	people are filing togethe	r, both are equally resp		
years, or both	. 18 U.S.C. §§ 152, 1341, 1		nkruptcy case can result in fine	es up to \$250,000, or imprisonment for up to 20
years, or both			nkruptcy case can result in fine	es up to \$250,000, or imprisonment for up to 20
years, or both	i. 18 U.S.C. §§ 152, 1341, 1	519, and 3571.	nkruptcy case can result in fine	
years, or both	i. 18 U.S.C. §§ 152, 1341, 1	519, and 3571.		
Did you	i. 18 U.S.C. §§ 152, 1341, 1	519, and 3571.		
Did you No □ Yes Under pe	ign Below pay or agree to pay some Name of person	519, and 3571.		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Did you No Yes Under pe	ign Below pay or agree to pay some Name of person nalty of perjury, I declare are true and correct.	519, and 3571.	orney to help you fill out bankru	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) this declaration and
Did you No Yes Under pe that they X /s/ C Chei	ign Below pay or agree to pay some Name of person nalty of perjury, I declare are true and correct. cheryl A. Steed ryl A. Steed	519, and 3571.	orney to help you fill out bankru	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) In this declaration and
Did you No Yes Under pe that they X /s/ C Chei	ign Below pay or agree to pay some Name of person nalty of perjury, I declare are true and correct.	519, and 3571.	orney to help you fill out bankru mmary and schedules filed with	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) This declaration and

E:U :	n Abia infam					
		nation to identify you	case:			
Debt	.01 1	Cheryl A. Steed First Name	Middle Name	Last Name		
Debt	or 2	Trevor A. Steed				
(Spou	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Ba	nkruptcy Court for the:	DISTRICT OF MARYLAN	ID		
Case (if kno	e number _				-	theck if this is an mended filing
Sta Be as	tement	and accurate as possi		are filing together, both are	equally responsible for sup	
		nore space is needed, n). Answer every ques		this form. On the top of any	y additional pages, write you	r name and case
Part	1: Give I	Details About Your Ma	rital Status and Where You	Lived Before		
1. \	What is you	r current marital statu	s?			
 	■ Married □ Not ma					
2. I	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live now	ı.	
	Debtor 1 Pi	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and W	
 	■ No □ Yes. Ma	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Expla	in the Sources of You	r Income			
I	Fill in the tota	al amount of income yo	nployment or from operating u received from all jobs and a have income that you received.	all businesses, including part		ndar years?
ı	□ No					
I	Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		r year before that: ecember 31, 2016)	■ Wages, commissions, bonuses, tips	\$13,795.79	■ Wages, commissions, bonuses, tips	\$2,812.00
			☐ Operating a business		☐ Operating a business	

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Debtor 2		evor A. St			Cas	e number (if known) _	
Incl and	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimo and other public benefit payments; pensions; rental income; interest; dividends; money collected winnings. If you are filing a joint case and you have income that you received together, list it only						yalties; and gambling and lottery
List	each s	source and t	4.				
	No						
		Fill in the de	etails.				
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of incomposcribe below.	Gross income (before deductions and exclusions)
		1 of curre	nt year until nkruptcy:	Pension Income	\$13,390.65		
					\$0.00	Social Security Benefits	\$15,020.00
		dar year: December	31, 2017)	Retirement Income	\$42,167.18		
					\$0.00	Social Security Benefits	\$17,676.00
		dar year be December		Retirement Income	\$60,583.00		
					\$0.00	Social Security Benefits	\$10,276.00
Part 3:	l ict	Certain Pa	vments Vou	Made Before You Filed for	Rankruntev		
		Debtor 1's	or Debtor 2 ebtor 1 nor D	s debts primarily consume	er debts? umer debts. Consumer debt	s are defined in 11 U.	S.C. § 101(8) as "incurred by an
		□ No.	90 days befo		lid you pay any creditor a tota	I of \$6,425* or more?	
		□ Yes	paid that cr		nts for domestic support oblig		ents and the total amount you support and alimony. Also, do
		* Subject	to adjustmen	on 4/01/19 and every 3 yea	rs after that for cases filed on	or after the date of a	djustment.
	Vac			r both have primarily consure you filed for bankruptcy.	<mark>umer debts.</mark> lid you pay any creditor a tota	I of \$600 or more?	
•	163.	During the	90 days belo	,	ina you pay any oroanter a total		
•	163.	■ No.	Go to line 7		, ,		
	163.	ŭ	Go to line 7 List below e include pay	each creditor to whom you pa	aid a total of \$600 or more and		u paid that creditor. Do not o, do not include payments to an

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	otor 1 Cheryl A. Steed Trevor A. Steed		Case	e number (if known)	
7.	Within 1 year before you filed for bankrupto <i>Insiders</i> include your relatives; any general par of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partne more of their voting	rships of which y securities; and a	ou are a genera any managing a	al partner; corporations agent, including one fo
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi		nents or transfer a	ny property on a	account of a d	ebt that benefited an
	No					
	Yes. List all payments to an insider	Datas of maximum	Total amount	A	December for	Aleia va avvena sud
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Include cred	this payment litor's name
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No					
Ī	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the case	
	Steed v. State Farm Ins. Co. W067329	Workers' Compensation claim	Workers' Compensation Commission		■ Pending □ On appeal □ Concluded	
	Unknown Plaintiff vs Unknown Defendant 0930805TJC	BankruptcyChapt er7	US BKPT CT GI	REENBELT	☐ Pending ☐ On appe	eal
					Discharge	ed - 0.00
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		rty repossessed, fo	oreclosed, garni	shed, attached	d, seized, or levied?
	Creditor Name and Address	Describe the Property		Date	•	Value of the
		Explain what happened				property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.		uding a bank or fin	ancial institutio	n, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date take	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an No Yes		rty in the possessi	on of an assign	ee for the ben	efit of creditors, a
Offici	ial Form 107 Statem	ent of Financial Affairs for In	dividuals Filing for B	ankruptcy		page 3

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_	otor 1 otor 2	Cheryl A. Steed Trevor A. Steed		Case number	GF (if known)	
Par	t 5:	List Certain Gifts and Contribution	ns			
13.	■ N	n 2 years before you filed for bankr No Yes. Fill in the details for each gift.	ruptcy,	did you give any gifts with a total value of more	than \$600 per person	?
	per p	with a total value of more than \$60 person on to Whom You Gave the Gift and		Describe the gifts	Dates you gave the gifts	Value
	Addr		-			
14.	■ N	n 2 years before you filed for banki No Yes. Fill in the details for each gift or o		did you give any gifts or contributions with a to	tal value of more than	\$600 to any charity?
	more Chari	or contributions to charities that than \$600 ity's Name ess (Number, Street, City, State and ZIP Cod		Describe what you contributed	Dates you contributed	Value
Par	t 6:	List Certain Losses				
15.	or gar	nbling? lo 'es. Fill in the details. ribe the property you lost and the loss occurred	Descr Includ	ibe any insurance coverage for the loss e the amount that insurance has paid. List pending	Date of your	Value of property lost
	t 7:	List Certain Payments or Transfer		nce claims on line 33 of Schedule A/B: Property.		
	Withir consult Included Note:	n 1 year before you filed for bankrulted about seeking bankruptcy or e any attorneys, bankruptcy petition plots. Fill in the details.	uptcy, d prepari prepare	id you or anyone else acting on your behalf paying a bankruptcy petition? rs, or credit counseling agencies for services requir Description and value of any property transferred		Amount of payment
	633 \	ess Counseling Inc. W. 5th Street, Suite 26001 Angeles, CA 90071		Credit counseling certificate.		\$15.00
	1738	tero Law Group, LLC B Elton Road, Suite 105 er Spring, MD 20903		Attorney fees.		\$1,500.00
17.	promi		ditors	id you or anyone else acting on your behalf pay or to make payments to your creditors? ted on line 16.	or transfer any prope	erty to anyone who
		lo				
		ess Fill in the details. on Who Was Paid ess		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Deb	otor 2 Trevor A. Steed		Ca	ase number (if known)	
	Within 2 years before you filed for bankrupto transferred in the ordinary course of your bu include both outright transfers and transfers mainclude gifts and transfers that you have already	usiness or financial affa ade as security (such as the	irs? he granting of a se		
	■ No □ Yes. Fill in the details.				
	Person Who Received Transfer Address	Description and va		Describe any property or payments received or debts paid in exchange	Date transfer was made
	Person's relationship to you			,	
	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-pro No		y property to a se	lf-settled trust or similar device	of which you are a
	Yes. Fill in the details.				
	Name of trust	Description and va	alue of the proper	ty transferred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposit	Boxes, and Stora	ige Units	
20.		y, were any financial acc r other financial accoun	counts or instrum	ents held in your name, or for y	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Do you now have, or did you have within 1 y cash, or other valuables?	rear before you filed for	bankruptcy, any	safe deposit box or other depos	sitory for securities,
	■ No □ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had accommod Address (Number, State and ZIP Code)		escribe the contents	Do you still have it?
22.	Have you stored property in a storage unit o	or place other than your	home within 1 ye	ar before you filed for bankrupt	cy?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		escribe the contents	Do you still have it?
Pari	t 9: Identify Property You Hold or Control	for Someone Else			
	Do you hold or control any property that sor for someone.	neone else owns? Inclu	ide any property y	ou borrowed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the proposition (Number, Street, City, St Code)		escribe the property	Value
Par	t 10: Give Details About Environmental Info	ormation			
For t	the purpose of Part 10, the following definition	ons apply:			
٠,٠,١	parpete e art re, are renoming definition				

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

Debtor 1 Cheryl A. Steed

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toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Debtor 1 Cheryl A. Steed Debtor 2 Trevor A. Steed

Case number (if known)

	regi	ulations controlling the cleanup of thes	e sub	stances, wastes, or material.					
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.						or utilize it or used		
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.								
Rep	ort a	II notices, releases, and proceedings the	nat yo	u know about, regardless of when	the	ey occurred.			
24.	Has	any governmental unit notified you that	at you	may be liable or potentially liable	und	der or in violation of an environm	ental law?		
		No							
		Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	l	Environmental law, if you know it	Date of notice		
25.	Hav	e you notified any governmental unit o	f any	release of hazardous material?					
		No							
		Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)			Governmental unit Address (Number, Street, City, State and ZIP Code)	l	Environmental law, if you know it	Date of notice		
26.	Hav	e you been a party in any judicial or ad	minis	trative proceeding under any envir	on	mental law? Include settlements	and orders.		
		No							
		Yes. Fill in the details.							
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case		
Par	+ 11-	Give Details About Your Business or	Conr	,					
				•		f th a fallaccion a annuation a ta anc	. hin.a.a.2		
27.	Witi	nin 4 years before you filed for bankrup	-			-	y business?		
		A sole proprietor or self-employed				•			
		A member of a limited liability com	pany	(LLC) or limited liability partnershi	b (r	LLP)			
		☐ A partner in a partnership							
		☐ An officer, director, or managing ex	director, or managing executive of a corporation						
		☐ An owner of at least 5% of the votil	ng or	equity securities of a corporation					
		No. None of the above applies. Go to	Part 1	2.					
		Yes. Check all that apply above and fi	ll in th	e details below for each business.					
	Ad	siness Name dress		scribe the nature of the business		Employer Identification numbe Do not include Social Security			
	(Nul	mber, Street, City, State and ZIP Code)	Nar	ne of accountant or bookkeeper		Dates business existed			
28.		nin 2 years before you filed for bankrup itutions, creditors, or other parties.	tcy, d	id you give a financial statement to	o aı	nyone about your business? Incl	ude all financial		
		No							
		Yes. Fill in the details below.							
	Ad	Name Address (Number, Street, City, State and ZIP Code)							

Part 12: Sign Below

I have read the answers on this *Statement* of *Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Cheryl A. Steed	
Debtor 2 Trevor A. Steed	Case number (if known)
	false statement, concealing property, or obtaining money or property by fraud in connection \$250,000, or imprisonment for up to 20 years, or both.
/s/ Cheryl A. Steed	/s/ Trevor A. Steed
Cheryl A. Steed	Trevor A. Steed
Signature of Debtor 1	Signature of Debtor 2
Date October 3, 2018	Date October 3, 2018
Did you attach additional pages to Your Stateme	ent of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No	
☐ Yes	
Did you pay or agree to pay someone who is no	t an attorney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of Person Attach the Bankru	uptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

C	Chapter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court District of Maryland

In re	Cheryl A. Steed Trevor A. Steed		Case No.	
		Debtor(s)	Chapter	7
	VEF	RIFICATION OF CREDITOR	MATRIX	
he ab	ove-named Debtors hereby verify	y that the attached list of creditors is true and c	orrect to the best o	f their knowledge.
Date:	October 3, 2018	/s/ Cheryl A. Steed		
		Cheryl A. Steed		
		Signature of Debtor		
Date:	October 3, 2018	/s/ Trevor A. Steed		
		Trover A Steed		

Signature of Debtor

Ackerman Security Systems P.O Box 933374 Atlanta, GA 31193-3374

Ameri Mark Premier P.O Box 2845 Monroe, WI 53566-8045

Barclays Bank Delaware P.o. Box 8803 Wilmington, DE 19899

Barclays Bank Delaware Attn: Correspondence Po Box 8801 Wilmington, DE 19899

BGE 2 Center Plaza 110 West Fayette Street Baltimore, MD 21201

Capital One 15000 Capital One Dr Richmond, VA 23238

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Citibank/Sears Po Box 6282 Sioux Falls, SD 57117

Citibank/Sears Po Box 6283 Sioux Falls, SD 57117 Citibank/Sears Attn: Bankruptcy Po Box 6275 Sioux Falls, SD 57117

Citibank/Sears Centralized Bankruptcy Po Box 790034 St Louis, MO 63179

Comenity Bank/Ashley Stewart Po Box 182789 Columbus, OH 43218

Comenity Bank/Ashley Stewart Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Comenity Capital Bank/PayPal P.O Box 5138 Lutherville Timonium, MD 21094-5138

Comenity/ MPRC Po Box 182120 Columbus, OH 43218

Comenity/ MPRC Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Continental Central Credit Inc. 5611 Palmer Way Ste G Carlsbad, CA 92010

Credit One Bank Po Box 98875 Las Vegas, NV 89193 Credit One Bank Attn: Bankruptcy Po Box 98873 Las Vegas, NV 89193

Dr. Scott Fisher, D.D.S 15C Street Laurel, MD 20707

First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104

First Premier Bank Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117

First Saving Bank / Blaze 5501 S Broadband Ln Sioux Falls, SD 57108

First Saving Bank / Blaze Attn: Bankruptcy Po Box 5096 Sioux Falls, SD 57117

Ginny's 1112 7th Avenue Monroe, WI 53566-1364

Kohl's
P.O Box 2983
Milwaukee, WI 53201-2983

Kohls/Capital One N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051 Kohls/Capital One Kohls Credit Po Box 3120 Milwaukee, WI 53201

Loan Acquisition Trust 2017 RPL1 c/o Rushmore Loan Management Services 15480 Laguna Canyon Road Irvine, CA 92618

Merrick Bank P.O Box 660702 Dallas, TX 75266-0702

Merrick Bank/CardWorks Pob 9201 Old Bethpage, NY 11804

Merrick Bank/CardWorks Po Box 9201 Old Bethpage, NY 11804

Merrick Bank/CardWorks Attn: Bankruptcy Po Box 9201 Old Bethpage, NY 11804

Montgomery Ward 1112 7th Avenue Monroe, WI 53566-1364

Old Navy P.O Box 530942 Atlanta, GA 30353-0942

Receivable Management Inc 7206 Hull Street Rd Ste North Chesterfield, VA 23235 Receivable Management Inc 7206 Hull Rd Ste 211 Richmond, VA 23235

Rushmore Lms Pob 52708 Irvine, CA 92619

Rushmore Lms Attn: Bankruptcy Po Box 55004 Irvine, CA 92619

Seventh Avenue 1112 7th Avenue Monroe, WI 53566-1364

Suntrust Bk Po Box 85052 Richmond, VA 23285

Suntrust Bk Attn: Bankruptcy Mail Code VA-RVW-6290 PO Box 85092 Richmond, VA 23286

Syncb/marlo Furniture 950 Forrer Blvd Kettering, OH 45420

Syncb/marlo Furniture Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Syncb/mattress Warehou 950 Forrer Blvd Kettering, OH 45420

Syncb/mattress Warehou Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/ JC Penneys Po Box 965007 Orlando, FL 32896

Synchrony Bank/ JC Penneys Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/ Old Navy Po Box 965005 Orlando, FL 32896

Synchrony Bank/ Old Navy Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/Amazon Po Box 965015 Orlando, FL 32896

Synchrony Bank/Amazon Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/Care Credit 950 Forrer Blvd Kettering, OH 45420

Synchrony Bank/Care Credit Attn: Bankruptcy Dept Po Box 965061 Orlando, FL 32896

Synchrony Bank/Home Shopping Po Box 965005 Orlando, FL 32896

Synchrony Bank/Home Shopping Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/Lowes Po Box 956005 Orlando, FL 32896

Synchrony Bank/Lowes Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/ShopNBC Po Box 965005 Orlando, FL 32896

Synchrony Bank/ShopNBC Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/Walmart Po Box 965024 Orlando, FL 32896

Synchrony Bank/Walmart Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Transworld Sys Inc/33 500 Virginia Dr Ste 514 Ft Washington, PA 19034

Transworld Sys Inc/33 Attn: Compliance Dept Po Box 15630 Wilmington, DE 19850

US Deptartment of Education/Great Lakes 2401 International Lane Madison, WI 53704

US Deptartment of Education/Great Lakes Attn: Bankruptcy Po Box 7860 Madison, WI 53707

Walmart P.O Box 530927 Atlanta, GA 30353-0927

Wells Fargo Bank Credit Bureau Dispute Resoluti Des Moines, IA 50306

Wells Fargo Bank Attn: Bankruptcy Dept Po Box 6429 Greenville, SC 29606

Williamsburg Plantation, Inc 5380 Olde Towne Road Williamsburg, VA 23188